

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	7596	8/8/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	32	5057	09-15-00
RESPONSE FORMALITY REVIEW	SK	809	12-14-00

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/8/00
2	✓	✓	8/8/00
3	✓	✓	8/8/00
4	✓	✓	8/8/00
5	✓	✓	8/8/00
6	✓	✓	8/8/00
7	✓	✓	8/8/00
8	✓	✓	8/8/00
9	✓	✓	8/8/00
10	✓	✓	8/8/00
11	✓	✓	8/8/00
12	✓	✓	8/8/00
13	✓	✓	8/8/00
14	✓	✓	8/8/00
15	✓	✓	8/8/00
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20	✓	✓	8/8/00
21	✓	✓	8/8/00
22	✓	✓	8/8/00
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25	✓	✓	8/8/00
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29	✓	✓	8/8/00
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40	✓	✓	8/8/00
41	✓	✓	8/8/00
42	✓	✓	8/8/00
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here.

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